

Name of Person Filing Document: _____
 Your Address: _____
 Your City, State, and Zip Code: _____
 Your Telephone Number: _____
 Atlas Number (if applicable): _____
 Attorney Bar Number (if applicable): _____
 Representing ☐ Self (Without Attorney) OR
 Attorney for ☐ Petitioner OR ☐ Respondent

SUPERIOR COURT OF ARIZONA MARICOPA COUNTY

Name of Petitioner

Case Number: _____

and

AFFIDAVIT REGARDING MINOR CHILDREN

Name of Respondent

NOTICE: This "Affidavit Regarding Minor Children" is required for all custody cases. You must fill out this Affidavit completely, and provide accurate information. Use additional paper if necessary. You must give copies of this Affidavit and all other required documents to the other party, and to the judge.

- 1. CHILDREN OF THE PARTIES WHO ARE UNDER 18 YEARS OLD.** The following child(ren) are under age 18 and were born to, or adopted by, me and the other party.

Name _____
 Birthdate: _____ Age: _____
 Name _____
 Birthdate: _____ Age: _____

Name _____
 Birthdate: _____ Age: _____
 Name _____
 Birthdate: _____ Age: _____

- 2. INFORMATION REGARDING WHERE THE CHILDREN UNDER 18 YEARS OLD HAVE LIVED FOR THE LAST 5 YEARS.**

Child's Name: _____
 Address: _____
 City, State: _____

Dates: From _____ To _____
 Lived with: _____
 Relationship to Child: _____

Child's Name: _____
 Address: _____
 City, State: _____

Dates: From _____ To _____
 Lived with: _____
 Relationship to Child: _____

Child's Name: _____
 Address: _____
 City, State: _____

Dates: From _____ To _____
 Lived with: _____
 Relationship to Child: _____

- 3. COURT CASES IN WHICH I HAVE BEEN A PARTY/WITNESS THAT INVOLVED THE CUSTODY PARENTING TIME OF THE CHILD(REN).** (Check one box.)

☐ I have or ☐ I have **not** been a party/witness in court in this state or in any other state that involved the custody parenting time of the child(ren) named above. (If so, explain on separate paper,. If not, go on.)

Case No. _____

Name of each child: _____
Name of Court: _____ Court Location: _____
Court Case Number: _____ Current Status: _____
How the child is involved: _____
Summary of any Court Order: _____

4. INFORMATION REGARDING PENDING COURT CASES RELATED TO THE CUSTODY OF THE CHILD(REN). (Check one box.)

☐ I do have or ☐ I do not have information about a custody parenting time court case relating to any of the children named above that is pending in this state or in any other state. (If so, explain. If not, go on.)

Name of each child: _____
Name of Court: _____ Court Location: _____
Court Case Number: _____ Current Status: _____
How the child is involved: _____
Summary of any Court Order: _____

5. CUSTODY OR PARENTING TIME CLAIMS OF ANY PERSON. (Check one box.)

☐ I do know or ☐ I do not know a person other than the Petitioner or the Respondent who has physical custody or who claims custody or parenting time rights to any of the children named in this Affidavit. (If so, explain below. If not, go on.)

Name of each child: _____
Name of person with the claim: _____
Address of person with the claim: _____
Nature of the claim: _____

OATH OR AFFIRMATION AND VERIFICATION

I swear or affirm that the information on this document is true and correct under penalty of perjury.

Signature

Date

Sworn to or Affirmed before me this: _____ by _____
(date)

My Commission Expires: _____
Deputy Clerk or Notary Public